

GTA 08-11-013

FOREIGN BODY OBSTRUCTION (FBAO) MANAGEMENT



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Support Centers (TSC)

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FOREIGN BODY AIRWAY OBSTRUCTION (FBAO) MANAGEMENT

PART I. INDICATORS AND DANGER/ SERIOUSNESS OF FBAO

A. INDICATORS: A partial or complete airway obstruction indicates that FBAO management is required.



1. A person with partial obstruction may have "good air exchange" or "poor air exchange."
 - a. If "good air exchange," encourage the person to cough. Monitor and call EMS if the obstruction persists.
 - b. If "poor air exchange," treat as a complete obstruction.
2. A complete obstruction prevents oxygen from entering and leaving the victim's lungs. The victim cannot speak or cough.

B. DANGER: Unconsciousness and death may rapidly occur.

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PART II. VICTIM IS CONSCIOUS

A. ADULT AND CHILD

1. Ask the person, "Are you choking?"
2. Determine if the person can cough or speak.
3. Perform the abdominal thrust maneuver if person cannot cough or speak.*
 - a. Stand behind person and wrap your arms around his waist.
 - b. Place a fist on his abdomen (thumb-side in). Grasp your fist with your other hand.
 - c. Give a quick upward thrust into the abdomen.
4. Repeat thrusts until object is expelled or the person becomes unconscious.

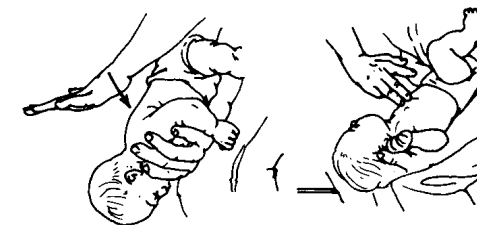


* If victim is pregnant or obese, perform backward thrusts on the middle of the sternum (breastbone).

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B. INFANT

1. Straddle the infant face down over your arm, with the head lower than the trunk.
2. Support the head firmly by holding the jaw.
3. Rest your forearm on your thigh and deliver 4 back blows forcefully between the shoulder blades with the heel of your hand.
4. Place your free hand on the infant's back and sandwich him between your hands. With one hand, support the neck, jaw, and chest; with the other, support the back.
5. Turn the infant face up and place him on your thigh with his head lower than the trunk.
6. Perform 4 chest thrusts by pressing on the lower half of his sternum, but above the xiphoid.
7. Continue administering cycles of 4 back blows and 4 chest thrusts until object is expelled or the infant becomes unconscious.



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PART III: VICTIM BECOMES UNCONSCIOUS

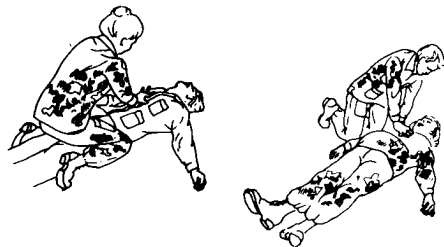
A. ADULT AND CHILD

1. Position the person face up.
2. Call for help.
3. Open the airway using the tongue-jaw lift. Perform a finger sweep to remove the object. Do not perform a finger sweep with a child unless you see the object.



4. Attempt to ventilate (give 2 full breaths).
5. If the airway remains obstructed (chest does not rise and fall), perform abdominal thrusts.*
 - a. Straddle the victim's thighs (if victim is an adult) or feet (if victim is a child).

* If victim is pregnant or obese, perform chest thrusts on the middle of the sternum.



- b. Place the heel of one hand against the person's abdomen, slightly above the navel and well below the breastbone. Place your other hand over the first hand.
 - c. Perform 6 to 10 quick upward thrusts.
6. Repeat steps 3 through 5 until object is expelled or you are able to ventilate the victim (chest rises and falls).

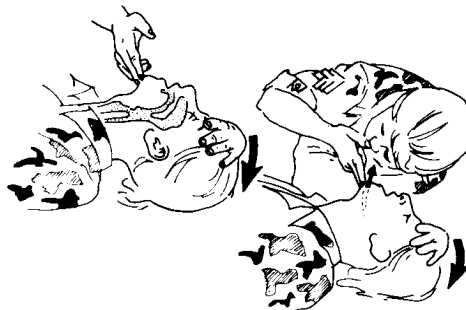
B. INFANT.

1. Call for help.
2. Place the infant face up.
3. Perform the tongue-jaw lift. Perform a finger sweep only if the object is seen.
4. Attempt to ventilate the infant.
5. If the attempt is unsuccessful, give 4 back blows and 4 chest thrusts (see Part II. B).
6. Repeat steps 3 through 5 until object is expelled or you are able to ventilate the infant.

PART IV. VICTIM FOUND UNCONSCIOUS

A. ADULT AND CHILD

1. Establish unresponsiveness by gently shaking the person and shouting, "Are you okay?"
2. Call for help.
3. Roll the person onto his back if necessary. Turn the victim as a unit.
4. Open the airway using the head-tilt/chin-lift method.
5. LOOK, LISTEN, and FEEL for breathing.



6. If the victim is not breathing, give 2 full breaths.
7. If the airway is blocked, reposition the head to open the airway more and try to ventilate again.

8. If the airway is still blocked, perform 6 to 10 abdominal thrusts (see Part III. A. 5).
9. Perform a tongue-jaw lift and finger sweep (see Part III. A. 3).
10. Attempt to ventilate.
11. If the airway is still blocked, repeat steps 8 through 10 until the object is expelled or you are able to ventilate the victim.

B. INFANT

1. Tap or gently shake the infant.
2. Call for help.
3. Position the infant face up.
4. Open the airway using the head-tilt/chin-lift method.

CAUTION: Do not over extend the neck as with an adult.

5. LOOK, LISTEN, and FEEL for breathing.
6. If the infant is not breathing, give 2 small breaths.
7. If the airway is blocked, reposition the head and try to ventilate again.
8. If the airway is still blocked, give 4 back blows and 4 chest thrusts (see Part II. B).
9. Perform a tongue-jaw lift and look into the mouth. Remove the foreign body if you see one.
10. Attempt to ventilate.
11. If ventilation is unsuccessful, repeat steps 8 through 10 until the object is expelled or you are able to ventilate the infant.